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21003 7590 03/12/2010 BAKER BOTTS L.L.P. 30 ROCKEFELLER PLAZA 44TH FLOOR				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
NEW YORK, NY 10112-4498				(Depositor's name)			
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO	CONFIRMATION NO.	
09/673,790 03/13/2001			Sean Christopher Martin	_	068315.0105	4211	
TITLE OF INVENTION: DECISION AID							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) I	DUE DATE DUE	
nonprovisional	NO	\$1510	\$0	\$0	\$1510	06/14/2010	
EXAMIN	ÆR	ART UNIT	CLASS-SUBCLASS				
HAVAN, THU THAO		3695	705-027000				
1. Change of correspondence CFR 1.363)  Change of correspon Address form PTO/SB/i  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	dence address (or Cha 122) attached.	nge of Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Socrates Holding GmbH  Salzburg, Austria  Please check the appropriate assignee category or categories (will not be printed on the patent):							
4a. The following fee(s) are Issue Fee Publication Fee (No	small entity discount p		<ul> <li>Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02-43/7 (enclose an extra copy of this form).</li> </ul>				
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interest as shown by the rec	oras of pite United Stat	es Patent and Trademark	Office.		T 10 0010		
Authorized Signature	<i>f~</i>			Date	June 10, 2010	· · · · · · · · · · · · · · · · · · ·	
Typed or printed name	Paul A. Ra	igusa		Registration No	o. <u>38,587</u>	······································	
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